

IDAHO REAL ESTATE APPRAISER BOARD
Bureau of Occupational Licenses
1109 Main Street, Suite 220
Boise, ID 83702

AMENDED APPLICATION FOR REGISTERED TRAINEE

INSTRUCTIONS: Please complete this form by providing all of the requested information. Read the application carefully. If you have been previously registered with the Board, you **MUST** include all requested information and the required fees (application fee of \$250.00 & registration fee of \$50.00). The fees are not required if you are amending an existing and active registration. Your signature, and that of your supervisor, must be notarized. Submit the completed application and fee to the address noted above. The application fee is not refundable once the Bureau has accepted the application for filing.

I hereby make application to reactivate or otherwise amend my Real Estate Appraiser Trainee registration.

1. **Full Name (Mr., Mrs., or Ms.)** _____

2. **Mailing Address** _____
Street/PO Box City State Zip

3. **Date of Birth** ____/____/____ **Place of Birth** _____ **Social Security #** ____/____/____
MM DD YYYY

4. **Business Name** _____

5. **Business Address** _____
Street/PO Box City State Zip

6. **Daytime phone** _(____)_____ **Fax** _(____)_____ **E-mail** _____

7. **Have you ever had a license or other registration revoked, suspended or otherwise sanctioned?** [☐]Yes [☐]No
(If Yes, a copy of the charges and the final order must be received before your application will be processed.)

8. **Have you ever been convicted of any State or Federal felony?** [☐]Yes [☐]No
(If Yes, a detailed statement, a summary of the charges, the final order, any probation or parole documentation, and any other relevant information must be received before your application will be processed.)

AFFIDAVIT

I hereby certify under penalty of perjury that the responses provided on and attached to this application are true and accurate to the best of my knowledge and belief, and that I may be required to provide additional information. I further certify that I am of good moral character and that I have reviewed and will comply with USPAP and the Idaho Laws and Rules governing the practice of Real Estate Appraisal and Real Estate Appraiser Trainees. I hereby authorize and direct any person, agency, firm, or other entity to release, upon the request of the Bureau of Occupational Licenses or it's authorized representative, any information, communication, report, record, statement, recommendation, or disclosure that may have bearing on my eligibility for or maintenance of the license for which I am applying. I understand that by signing this form I am authorizing the release of information about me that may otherwise be protected or confidential, and that I may be required to submit additional information in order for my application to be considered by the Board.

Signature of Applicant

State of _____, County of _____, ss.

Subscribed and sworn before me this _____ day of _____, 20 _____.

(seal)

Notary Public official signature
my commission expires _____

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(continued)

Trainee Name _____

SUPERVISING APPRAISER INFORMATION AND AFFIDAVIT

Supervisor's Business Name _____

Supervisor's Business Address _____
Street/PO Box City State Zip

Daytime phone _()_ **Fax** _()_ **E-mail** _____

I hereby certify under penalty of perjury that I hold an Idaho Real Estate Appraiser license in good standing and that I have not been the subject of discipline by the Idaho Real Estate Appraiser Board within the previous four (4) years. I further certify that I am not supervising more than three (3) appraiser trainees, including the applicant.
I further certify that I have reviewed and will comply with USPAP and the Idaho Laws and Rules governing the practice of Real Estate Appraisal and Real Estate Appraiser Trainees. I understand the responsibilities and requirements for the training and direct supervision of the applicant.

Print Supervisor's Name & License Number

Signature of Supervising Appraiser

State of _____, County of _____, ss.

Subscribed and sworn before me this _____ day of _____, 20 _____.

(seal)

Notary Public official signature
my commission expires _____

NOTE:

Each licensee who provides you with supervision during your trainee period must complete a Supervising Appraiser Affidavit. This page may be copied as necessary if you have more than one supervisor. Attach the completed copies to page 1.